



**St. Elizabeth**  
PHYSICIANS



**St. Elizabeth**  
HEALTHCARE

# OUR MODEL FOR HEALTH EQUITY CULTURE AND COMMUNITY

CBL 2025

# COURSE INFORMATION

## CBL Navigation Instructions

- Target Audience: : All SEH & SEP associates and volunteers.
- This CBL includes 30 content slides.
- You must review each slide for completion credit.
- This module includes 1 assessment located at the end of the module
- Final assessment requires passing score of 100%.

You have unlimited attempts

- Technical issues? Contact helpdesk (12541).

# OBJECTIVES

**After completing this module, the learner will be able to:**

- **Define Health Equity, Culture and Community**
- **Articulate the connection between Health Equity, Culture and Community and St. Elizabeth's Strategic Framework**
- **Understand the Joint Commission's standards connected to Health Equity, Culture and Community**
- **Define Social Determinants of Health and their importance in ensuring St. Elizabeth will lead the communities we serve to be the healthiest among the nation**
- **Understand ways in which discrimination may take place and ways to avoid or actively prevent said discrimination**

# DEFINING HEALTH EQUITY, CULTURE & COMMUNITY

You might have heard of DEI - Diversity, Equity & Inclusion, but what the heck is HECC?

## Health Equity

- We strive to achieve equitable outcomes for patients and their families so each patient can become their healthiest self. Equitable outcomes require culturally competent care leveraging data to improve health outcomes. We employ many tools and strategies to help meet each patient's needs and goals.

## Culture

- Our team members have the opportunity to join one of six (6) associate resource groups intended to provide connection to each other and our communities. Similarly, leaders and associates are invited to participate and learn more through activities and dedicated learning resources that deepen understanding, cultural competence, and empathy.

## Community

- In line with our vision to help our region become one of the healthiest communities in the nation, we continually work to enhance community partnerships and engagement, especially to support the underserved. We develop programs that collaborate with local organizations to address key needs for the whole of our community.

# DEFINING HEALTH EQUITY, CULTURE & COMMUNITY

## Test Your Knowledge

What is the primary goal of Health Equity at St. Elizabeth

---

- ☐ To provide the same treatment to all patients
- ☐ To achieve equitable outcomes for patients and their families
- ☐ To prioritize the needs of the majority
- ☐ To reduce healthcare costs

# DEFINING HEALTH EQUITY, CULTURE & COMMUNITY

## Test Your Knowledge

What is the primary goal of Health Equity at St. Elizabeth

---

- ☐ To provide the same treatment to all patients
- ☒ To achieve equitable outcomes for patients and their families
- ☐ To prioritize the needs of the majority
- ☐ To reduce healthcare costs

 **Correct!**

# A CULTURE OF ENCOUNTER

In Pope Francis' words:

“ It is neither a culture of confrontation nor a culture of conflict which builds harmony within and between peoples, but rather a culture of encounter and a culture of dialogue; this is the only way to peace.

Pope Francis

# WHY THE TRANSITION TO HECC FROM DEI (DIVERSITY, EQUITY, AND INCLUSION)?

**There are several reasons for the change. Here are a few to highlight:**

1. To reiterate St. Elizabeth's commitments to creating a culture of whole-person health equity and supporting the internal AND external communities we serve to become among the healthiest in the nation.
2. The new name reflects the ways our St. Elizabeth Mission and Vision continue to inform the work being done every day, and how it is carried out on behalf of our associates and our communities.
3. This renewed focus is designed to recognize and celebrate the existing culturally compassionate care being provided and to enhance the organization's efforts to demonstrate its commitment to providing culturally competent and inclusive care.
4. To emphasize the culture of inclusion within the 'walls' of St. Elizabeth and continually work toward infusing these principles across the system to the benefit of ALL of our associates



# MISSION, VISION, STRATEGY & COMPLIANCE

## Strategic Framework

Health equity, culture, and community are embedded in all areas of our strategic framework. At St Elizabeth, they are the driving spirits in everything we do for our patients, for our community, and for each other — connecting the compassionate care we deliver and the healthy community we envision with an assurance of dignity and respect for all

### MISSION

As a Catholic healthcare ministry, we provide comprehensive and compassionate care that improves the health of the people we serve.

### VISION

St. Elizabeth will lead the communities we serve to become the healthiest in America.



# MISSION, VISION, STRATEGY & COMPLIANCE

## The Joint Commission

Not only are health equity, culture, and community core to St. Elizabeth's strategic framework, but the Joint Commission also has several standards that support the provision of care, treatment, and services in a manner that addresses disparities and disabilities issues, including discrimination, disability, communication, language, and culture. The following slides lists these standards

# MISSION, VISION, STRATEGY & COMPLIANCE

## The Joint Commission

- Prohibit Discrimination
- Access to Support Individual
- Collect Language Data, including:
  - Language and Communication Needs
  - Preferred Language Data
- Address Language Needs:
  - Respect the Need for Effective Communication
  - Identify and Address Communication Needs
  - Meet Communication Needs
  - Provide Interpreter and Translation Services
  - Address Vision, Speech, Hearing Needs
- Address Health Literacy Needs
- Address Cultural Needs
- Qualifications for Language Interpreters and Translators
- Address Patient Rights and Treat with Dignity and Respect
- Address Complaints
- Plan for Fire Response
- Provide Safe Functional Environment
- Manage Environment During Construction
- Address Integrity of Egress
- Provide Fire Alarm Systems
- Plan for Emergency Operations
- Plan for Communicating During Emergencies

# MISSION, VISION, STRATEGY & COMPLIANCE

## The Joint Commission

Which of the following standards are supported by the Joint Commission to address disparities and disabilities issues?

---

- ☐ Collect Race and Ethnicity Data
- ☐ Plan for Fire Response
- ☐ Provide Safe Functional Environment
- ☐ Prohibit Discrimination

# MISSION, VISION, STRATEGY & COMPLIANCE

## The Joint Commission

Which of the following standards are supported by the Joint Commission to address disparities and disabilities issues?

---

- ☐ Collect Race and Ethnicity Data
- ☐ Plan for Fire Response
- ☐ Provide Safe Functional Environment
- ☐ Prohibit Discrimination

 **All of these!**

# SOCIAL DETERMINANTS OF HEALTH

## Key Influencer of Health Equity & Outcomes

A further important concept in understanding the importance of health equity, culture, and community to ensure we lead the communities we serve to be among the healthiest in the nation and provide comprehensive and compassionate care that improves the health of the people we serve is "social determinants of health."



# SOCIAL DETERMINANTS OF HEALTH

## Key Influencer of Health Equity & Outcomes

Fill in the blank based on the above video: Safe and healthy neighborhoods have access to \_\_\_\_\_ and safe sidewalks for walking and recreation, access to stores where healthy food is always affordable and available, and safe and reliable \_\_\_\_\_.

# SOCIAL DETERMINANTS OF HEALTH

## Key Influencer of Health Equity & Outcomes

Fill in the blank based on the above video: Safe and healthy neighborhoods have access to \_\_\_\_\_ and safe sidewalks for walking and recreation, access to stores where healthy food is always affordable and available, and safe and reliable \_\_\_\_\_.

**Answer: Parks, Transportation**



# PROHIBIT DISCRIMINATION

## Per Joint Commission Standards

Per Joint Commission standards, healthcare programs that receive federal assistance are prohibited from discriminating based on "age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression."

# PROHIBIT DISCRIMINATION

As a health program that receives Federal assistance, St. Elizabeth Healthcare **MAY NOT:**

**SEGREGATE, DELAY OR  
DENY**

Segregate, delay or deny services or benefits based on an individual's race, color or national origin.

# PROHIBIT DISCRIMINATION

As a health program that receives Federal assistance, St. Elizabeth Healthcare MAY NOT:

**REQUIRE**

Require parents to disclose citizenship or immigration status when applying for health services for eligible children.

# PROHIBIT DISCRIMINATION

As a health program that receives Federal assistance, St. Elizabeth Healthcare **MAY NOT:**

**DELAY OR DENY**

Delay or deny effective language assistance services to individuals with limited English proficiency (LEP).

# PROHIBIT DISCRIMINATION

**St. Elizabeth Healthcare also MAY NOT Discriminate based on:**

## Age

**St. Elizabeth may not exclude, deny or limit benefits and services based on an individual's age.**

- **A covered entity may provide different treatment based on age when the treatment is justified by scientific or medical evidence.**
- **A physician may decide to deny a mammogram to a woman under a certain age because recent medical studies suggest that mammograms may be more harmful than helpful to young women.**
- **A physician may decide not to treat a patient based on a specialty (e.g., pediatricians are not required to treat adults and gerontologists not required to treat children)**

# PROHIBIT DISCRIMINATION

St. Elizabeth Healthcare also MAY NOT Discriminate based on:

## An Individual's Sex

St. Elizabeth cannot deny, or limit sex-specific health services based solely on the fact that the gender identity or gender recorded for an individual does not align with the sex of individuals who usually receive those types of sex-specific services. St. Elizabeth Healthcare must:

- Provide equal access to health care, health insurance coverage, and other health programs without discrimination based on sex, including gender identity and sex stereotypes.
  - Gender identity means an individual's internal sense of gender, which may be male, female, neither, or a combination of male and female.
  - Sex stereotypes include heteronormative notions of masculinity or femininity.
- Treat individuals consistent with their gender identity (vocalized or written) and respect their access to facilities, such as bathrooms and patient rooms.

# PROHIBIT DISCRIMINATION

St. Elizabeth Healthcare also MAY NOT Discriminate based on:

## Religion

- Avoid generalizing, and withhold judgment about the patient's beliefs and practices - even if they differ from your own.
- Establish open communication with patients' family members.
- Learn about the traditions of patients' religious beliefs and familial support system.
- Treat everyone with RESPECT AND CARE — It is the universal language.

# PROHIBIT DISCRIMINATION

**St. Elizabeth Healthcare also MAY NOT Discriminate based on:**

## Disability

Examples of discrimination may include:

- Clinicians not acknowledging or interacting directly with children who have disabilities, instead only speaking to their caregivers.
- Making patients with disabilities wait longer due to limited accessible examination rooms.
- Requiring patients with disabilities to bring an attendant or companion, even if unwanted.
- Refusing to serve patients with disabilities because exams may take longer.
- Lack of appropriate accommodations like wheelchair scales, accessible doors, ramps, and parking for larger vehicles.



# PROHIBIT DISCRIMINATION

St. Elizabeth Healthcare also MAY NOT Discriminate based on:

## Sexual Orientation

Examples provided by the Joint Commission include studies of lesbian and bisexual women indicating that disclosing sexual orientation to their physicians would negatively affect their health care, and women who received care from providers who were knowledgeable and sensitive to lesbian issues were significantly more likely to have received a Pap test.

# PROHIBIT DISCRIMINATION

## Neurodiversity

Neurodiversity describes the idea that people experience and interact with the world around them in many ways; there is no one "right" way of thinking, learning, and behaving, and differences are not viewed as deficits.

# PROHIBIT DISCRIMINATION

## Tips for Making the Workplace Neurodiversity-friendly:

- Offer small adjustments to an employee's workspace to accommodate any sensory needs, such as
  - Sound sensitivity: Offer a quiet break space, communicate expected loud noises (like fire drills), and offer noise-canceling headphones.
  - Tactile: Allow modifications to the usual work uniform.
  - Movements: Allow the use of fidget toys, allow extra movement breaks, and offer flexible seating.
- Use a clear communication style:
  - Avoid sarcasm, euphemisms, and implied messages.
  - Provide concise verbal and written instructions for tasks, and break tasks down into small steps
- Inform people about workplace/social etiquette, and don't assume someone is deliberately breaking the rules or being rude.
- Try to give advance notice if plans are changing, and provide a reason for the change.
- Don't make assumptions — ask a person's individual preferences, needs, and goals.
- Be kind, be patient.

# PROHIBIT DISCRIMINATION

## Diagnostic Overshadowing

Diagnostic overshadowing is a bias where healthcare professionals attribute symptoms to an existing diagnosis rather than a potential co-morbid condition. It occurs when a healthcare professional assumes that a patient's complaint is due to their disability or coexisting mental health condition instead of fully exploring the cause of the patient's symptoms

# PROHIBIT DISCRIMINATION

## Diagnostic Overshadowing Example 1

A patient with a mental illness diagnosis experiences frequent nausea and stomach pain. The doctor attributes these symptoms to a somatization disorder related to the mental illness, rather than investigating further. Later, it's discovered the patient actually has small intestinal bacterial overgrowth.

# PROHIBIT DISCRIMINATION

## Diagnostic Overshadowing Example 2

A person with an intellectual disability exhibits head-banging behavior. Healthcare staff diagnose this as a psychiatric problem and prescribe medication. However, the real cause is a dental abscess causing pain that the patient cannot effectively communicate.

# PROHIBIT DISCRIMINATION

## Diagnostic Overshadowing Example 3

A 26-year-old woman visits the emergency department with pelvic pain and diarrhea. Upon reviewing her history of anxiety medication and a previous sexually transmitted disease diagnosis, the physician hastily attributes her symptoms to pelvic inflammation from an STD without conducting a thorough examination or discussing her social history.

# PROHIBIT DISCRIMINATION

## Diagnostic Overshadowing

Diagnostic overshadowing affects various groups, particularly people with:

- *Physical disabilities*
- *Mental illnesses*
- *Autism*
- *Mobility disabilities*
- *Neurological deficits*
- *LGBTIQA+ identifications*
- *History of substance abuse*
- *Low health literacy*
- *Obesity*

If the St. Elizabeth system is to ensure that we will lead the communities we serve to be among the healthiest in the nation, it is important that we recognize, address, and educate ourselves on the unique needs of ALL our patients and community members.



# PROHIBIT DISCRIMINATION

## Diagnostic Overshadowing

What is diagnostic overshadowing?

---

- ☐ A bias where healthcare professionals attribute symptoms to an existing diagnosis rather than a potential co-morbid condition.
- ☐ A method used to prioritize treatment for patients with multiple conditions.
- ☐ A strategy to improve communication between healthcare providers and patients.
- ☐ A process to ensure all patients receive the same level of care.

# PROHIBIT DISCRIMINATION

## Diagnostic Overshadowing

What is diagnostic overshadowing?

- ☒ A bias where healthcare professionals attribute symptoms to an existing diagnosis rather than a potential co-morbid condition.
- ☐ A method used to prioritize treatment for patients with multiple conditions.
- ☐ A strategy to improve communication between healthcare providers and patients.
- ☐ A process to ensure all patients receive the same level of care.

 **Correct!**

# REFERENCES

- Baumer, N., & Frueh, J. (n.d.). What is neurodiversity? Harvard Health Publishing. Retrieved November 14, 2024, from is-neurodiversity-202111232645 <https://www.health.harvard.edu/blog/what>
- Centers for Disease Control and Prevention. (2024). Social determinants of health [Video]. Health Equity Video Series. [is/video.html equity/what https://www.cdc.gov/health](https://www.cdc.gov/health)
- Crouch, R. (n.d.). Kentucky-An edge state with numerous opportunities. Kentucky State Data Center, University of Louisville.
- Hong, L., & Page, S. E. (2004). Groups of diverse problem solvers can outperform groups of high-ability problem solvers. *Proceedings of the National Academy of Sciences*, 101(46), 16385-16389.
- Hunt, V., Layton, D., & Prince, S. (2015, February). Why diversity matters. McKinsey & Company.
- Lipson, J. G., & Dibble, S. L. (2005). *Culture and clinical care*. UCSF Nursing Press.
- Pope and Associates. (2005). *Creating an inclusive & respectful workforce [Intellectual Property]*.
- Rizy, C., Feil, S., Sniderman, B., & Egan, M. E. (2011, July). Global diversity and inclusion: Fostering innovation through a diverse workforce. *Forbes Insights*.
- The Joint Commission. (2022). Diagnostic overshadowing among groups experiencing health disparities (Sentinel Event Alert, Issue 65). The Joint Commission
- The Joint Commission. (2024). Standards for the Joint Commission's healthcare accreditation process. The Joint Commission. Retrieved from [https://www.jcaho.org/about+us/hlc/hlc\\_jc\\_stds.pdf](https://www.jcaho.org/about+us/hlc/hlc_jc_stds.pdf)

# ASSESSMENT



1. Our St. Elizabeth Healthcare Diversity Statement recognizes that:
  - A. We must always strive to honor the dignity of every human being.
  - B. We have a duty to respect all who come to us for care.
  - C. Both of the above.
  
2. I understand St. Elizabeth's non-discrimination requirements, and I agree to treat all patients with dignity and respect.
  - A. True
  - B. False

# ASSESSMENT



3. We must abide by Joint Commission standards on providing care, treatment and services that respect the cultural, language, literacy and learning needs of all our patients.
  - A. True
  - B. False
4. How does discrimination impact health equity within a community? *(List all that apply)*
  - A. It creates barriers to accessing healthcare.
  - B. It leads to mistrust in the healthcare system.
  - C. It only affects economic stability.
  - D. It worsens healthcare outcomes for marginalized groups.
  - E. It has no significant impact.

# THANK YOU!